

**Application Data Sheet****Application Information**

Application number::	Not Yet Assigned
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	Paper
Computer Readable Form (CRF)?::	No
Title::	COMPOSITIONS AND METHODS FOR TREATING RAGE-ASSOCIATED DISORDERS
Attorney Docket Number::	WYTH-P01-002
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Debra
Middle Name::	D.
Family Name::	Pittman
City of Residence::	Windham
State or Province of Residence::	NH
Country of Residence::	US
Street of mailing address::	20 North Shore Road P.O. Box 171
City of mailing address::	Windham

State or Province of mailing address:: NH  
Postal or Zip Code of mailing address:: 03087

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Brian  
Family Name:: Clancy  
City of Residence:: Ashland  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 6 Pondview Lane  
City of mailing address:: Ashland  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01721

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Glenn  
Family Name:: Larsen  
City of Residence:: Sudbury  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 112 Maynard Farm Road  
City of mailing address:: Sudbury  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01776

Applicant Authority Type:: Inventor  
Status:: Full Capacity  
Given Name:: William  
Middle Name:: L.

Family Name:: Trepicchio  
City of Residence:: Andover  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 21 Abbott Bridge Drive  
City of mailing address:: Andover  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01810

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Ireland  
Status:: Full Capacity  
Given Name:: Fionula  
Middle Name:: Mary  
Family Name:: Brennan  
City of Residence:: Middlesex  
Country of Residence:: United Kingdom  
Street of mailing address:: 45 Holmesdale Road  
Teddington  
City of mailing address:: Middlesex  
Country of mailing address:: United Kingdom  
Postal or Zip Code of mailing address:: TW11 9LJ

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Marc  
Family Name:: Feldmann  
City of Residence:: London  
Country of Residence:: United Kingdom  
Street of mailing address:: 5 Durham Terrace  
City of mailing address:: London  
Country of mailing address:: United Kingdom

Postal or Zip Code of mailing address:: W2 5PB

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Brian John Maurice  
Family Name:: Foxwell  
City of Residence:: Middlesex  
Country of Residence:: United Kingdom  
Street of mailing address:: 23 Landsdowne Road  
Hounslow  
City of mailing address:: Middlesex  
Country of mailing address:: United Kingdom  
Postal or Zip Code of mailing address:: TW3 1LQ

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jeffrey  
Middle Name:: L.  
Family Name:: Feldman  
City of Residence:: Arlington  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: One Old Colony Lane, Apt. 12  
City of mailing address:: Arlington  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02476

#### **Correspondence Information**

Correspondence Customer Number:: 28120

#### **Representative Information**

Representative Customer Number:: 28120

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/404205	08/16/02

**Assignee Information**

Assignee name:: Wyeth